## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	<u> </u>	70591	2122	
O.I.P.E. CLASSIFIER	<b>60</b>	-	1/1/	
FORMALITY REVIEW		69652	4/8/00	
RESPONSE FORMALITY REVIEW			4-26/00	
	· · · · · · · · · · · · · · · · · · ·	<u> </u>	1 26/0-	

## INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

1.0	÷	Restricted		Objected	
•					
Claim 0	Date	Claim	Date	Claim	Date
Final Original		Final Original		g	
Final Origina		Final		Final	
1 11/1/		51	<del>+                                    </del>	101	<del></del>
1 2777	<del>                                     </del>	52		102	<del></del>
3 1 1 1		53		103	<del></del>
4 1		54		104	<del>                                      </del>
37		55		105	
1 6 7 0 1	<del>                                     </del>	56		106	
		57	<del></del>	107	<del></del>
8 1	<del>                                     </del>	59	<del>                                     </del>	108	<del></del>
10		60		110	<del></del>
111		61		111	<del>.                                     </del>
12		62		112	<del>-                                     </del>
13		63		113	
14		64		114	
15		65		115	
16	+	66	+	116	_
18		67	+	117	
19	+++++	69	+-+-+	118	<del></del>
20		70	<del>                                     </del>	120	<del>- - - - -</del>
21	<del>                                     </del>	71	<del>                                     </del>	121	<del></del>
22		72	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	122	<del>- - - - -</del>
23		73		123	<del></del>
24		74		124	2.
25		75		125	
26		76		126	
28	<del> - - - - </del>	77 78	<del></del>	127	
29		79		129	<del></del>
30		80		130	<del></del>
31		81		131	<del></del>
32		82		132	<del>                                     </del>
33		83		133	
34		84		134	
35		85	<del>                                     </del>	135	
37		87	╂┼┼┼┼┼┼	136	
38		88	++++	138	<del></del>
39		89		139	<del></del>
40		90		140	
41		91		141	
42		92		142	<del>+                                     </del>
43		93		143	
44		94		144	
45		95		145	
46	<del>┤┤┤┤</del> ┤┤┤	96	++++++++++++++++++++++++++++++++++++	146	<del>                                     </del>
48	<del>-                                     </del>	98	╫┼┼┼	147	+++++
49		99	<del>╎┋┋┋</del>	148	<del>                                     </del>
50		100		150	
				<del></del>	

If more than 150 claims or 10 actions staple additional sheet here

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BEST AVAILABLE COPY